

**TRANSMITTAL
FORM**

	Application Serial Number	09/755,951
	Filing Date	January 4, 2001
	First Named Inventor	Vestal
	Group Art Unit	1743
	Examiner Name	Soderquist, A.
	Attorney Docket No.	SYP-060RECN
	BATCH NO. (after allowance)	Not applicable
	Patent No.	Not applicable
	Issue Date	Not applicable

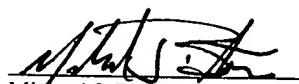
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	

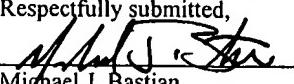
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JAN 14 2002

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CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	Respectfully submitted,  Michael J. Bastian Attorney for Applicant Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110

Fee Transmittal BY 2002 JAN 07 2002		<i>Complete if Known</i> Application Serial Number 09/755,951 Filing Date January 4, 2001 First Named Inventor Vestal Group Art Unit 1743 Examiner Name Soderquist, A. Attorney Docket No. SYP-060RECN	
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METHOD OF PAYMENT		FEE CALCULATION (continued)																																							
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		<p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th rowspan="2" style="text-align: left;">Fee Description</th> <th rowspan="2" style="text-align: right;">Fee Paid</th> </tr> <tr> <th>Fee (\$)</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td style="text-align: right;">110.00</td> </tr> <tr> <td>400</td> <td>200</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>920</td> <td>460</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1440</td> <td>720</td> <td>Extension for reply within fourth month</td> <td></td> </tr> </tbody> </table>		Large Entity	Small Entity	Fee Description	Fee Paid	Fee (\$)	Fee (\$)	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month	110.00	400	200	Extension for reply within second month		920	460	Extension for reply within third month		1440	720	Extension for reply within fourth month	
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.																																									
<input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																									
3. <input type="checkbox"/> Applicant claims small entity status.																																									
FEE CALCULATION																																									
1. FILING FEE																																									
Large Entity Fee (\$) Fee Description		Fee Paid																																							
740 Utility filing fee 330 Design filing fee 160 Provisional filing fee																																									
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Independent Claims - 3 = x \$ 84.00 =																																									
<input type="checkbox"/> Multiple Dependent Claim(s), if any \$280.00 =																																									
TOTAL: SMALL ENTITY DISCOUNT: SUBTOTAL (1) (\$)																																									
2. AMENDMENT CLAIM FEES																																									
Claims Remaining After Amend.		Highest No. Previously Paid For Present Extra Rate Fee Paid																																							
Total 24 - 20 = 4		x \$ 18.00 = \$72																																							
Indep. 7 - 3 = 4		x \$ 84.00 = \$336																																							
<input type="checkbox"/> First Presentation of Multiple Dep. Claim		+ \$280.00 =																																							
TOTAL: SMALL ENTITY DISCOUNT: SUBTOTAL (2) (\$)		SUBTOTAL (1) (\$) SUBTOTAL (2) (\$) SUBTOTAL (3) (\$)																																							
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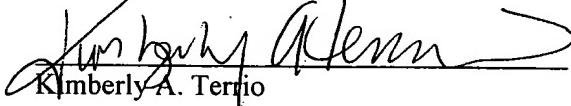
PATENT
Attorney Docket No. SYP-060RECN
(7783/47)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Vestal
SERIAL NO.: 09/755,951 GROUP NO.: 1743
FILING DATE: January 4, 2001 EXAMINER: Soderquist, A.
TITLE: MASS SPECTROMETER SYSTEM AND METHOD FOR MATRIX-ASSISTED LASER DESORPTION MEASUREMENTS

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Commissioner for Patents, Washington, DC 20231 on the 19th day of November, 2001.



Kimberly A. Terrio

Commissioner for Patents
Washington, D.C. 20231

Sir:

Submitted herewith by Certificate of First Class Mailing is/are:

- Transmittal Form (1 page);
- Fee Transmittal (1 page);
- Amendment and Response (15 pages);
- Request for One Month Extension of Time (1 page);
- check in the amount of \$518.00; and
- A Return Receipt Postcard.

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